K05 15601/2

JUN 2 8 2005

510(k) Summary

Trade Name: Nexus Multi-Diameter CSR and Nexus Helix Super Soft CSR

Generic Name: Neurovascular Embolization Device

Classification: Class II, 21 CFR 882.5950

Submitted By: Micro Therapeutics, Inc.
2 Goodyear
Irvine, California 92618

irvine, Calife

Contact:

Florin Truuvert

Predicate Device:

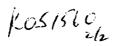
Number	Description	Predicate For	Clearance Date
K050543	Nexus Detachable Coil System	Nexus Detachable Coil, Helix Super Soft CSR	April 27, 2005

Device Description

The Nexus coils are platinum alloy coils, enlaced with absorbable polymer fibers, and attached to a stainless steel guiding system with a radiopaque positioning coil. Nexus coils are designed for use with the NXT Detachment System specifically designed for coil detachment. The NXT Detachment System is sold separately.

Indication For Use

The Nexus Detachable Coils are intended for the endovascular embolization of intracranial aneurysms that — because of their morphology, their location, or the patient's general medical condition — are considered by the treating neurosurgical team to be a) very high risk for management by traditional operative techniques, or b) be inoperable. The Nexus Detachable Coils are also intended for the embolization of other neuro vascular abnormalities, such as, arteriovenous malformations and arteriovenous fistulae.



Verification and Test Summary Table

Bench Testing	Result	
Coil Deformation	Met established criteria	
Dimensional & Visual Analysis	Met established criteria	
Coating Integrity	Met established criteria	
Force Transfer	Met established criteria	
Ease of Delivery/Coil Frictional Characteristics	Met established criteria	
Fiber endurance Testing	Met established criteria	
Reliability After Fatigue & Premature Detachment	Met established criteria	
Fiber Pull-Out	Met established criteria	
Tensile Strength	Met established criteria	
Particulate Generation - Adjusted Particles / 1 mL	Met established criteria	
PGLA Tensile Testing	Met established criteria	
Packaging Integrity	Met established criteria	

Summary of Substantial Equivalence

The data presented in this submission demonstrates the technological similarity and equivalency of the Nexus Multi-Diameter CSR and Helix Super Soft CSR coils compared with the predicate device Nexus Detachable Coils.

The two devices,

- Have the same intended use,
- Use the same operating principle,
- · Incorporate the same basic design,
- Use similar construction and material,
- Are packaged and sterilized using same processes.

In summary, the Nexus coils described in this submission are, in our opinion, substantially equivalent to the predicate device.



Food and Drug Administration 9200 Corporate Boulevard Rockville MD 20850

JUN 2 8 2005

Ms. Florin Truuvert Regulatory Affairs Manager Micro Therapeutics Incorporated 2 Goodyear Irvine, California 92618

Re: K051560

Trade/Device Name: Nexus Detachable Coil, Multi-Diameter CSR and Helix Super Soft

CSR

Regulation Number: 21 CFR 882.5950

Regulation Name: Artificial embolization device

Regulatory Class: II Product Code: HCG Dated: June 10, 2005 Received: June 14, 2005

Dear Ms. Truuvert:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to such additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the <u>Federal Register</u>.

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21 CFR Part 807); labeling (21 CFR Part 801); good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050.

Page 2 – Ms. Florin Truuvert

This letter will allow you to begin marketing your device as described in your Section 510(k) premarket notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus, permits your device to proceed to the market.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801), please contact the Office of Compliance at (240) 276-0115. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21 CFR Part 807.97). You may obtain other general information on your responsibilities under the Act from the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (301) 443-6597 or at its Internet address http://www.fda.gov/cdrh/industry/support/index.html.

Sincerely yours,

Miriam C. Provost, Ph.D.

Acting Director

Division of General, Restorative and Neurological Devices Office of Device Evaluation Center for Devices and

Radiological Health

Enclosure

K051560

Indications for Use

510(k) Number (if known):

Device Name: Nexus Detachable Coil, Multi-Diameter CSR and Helix Super Soft CSR

Indications For Use:

The Nexus Detachable Coils are intended for the endovascular embolization of intracranial aneurysms that – because of their morphology, their location, or the patient's general medical condition – are considered by the treating neurosurgical team to be a) very high risk for management by traditional operative techniques, or b) be inoperable. The Nexus Detachable Coils are also intended for the embolization of other neuro vascular abnormalities, such as, arteriovenous malformations and arteriovenous fistulae.

Prescription Use X (Part 21 CFR 801 Subpart D)

AND/OR

Over-The-Counter Use _____(21 CFR 807 Subpart C)

(PLEASE DO NOT WRITE BELOW THIS LINE-CONTINUE ON ANOTHER PAGE IF NEEDED)

Concurrence of CDRH, Office of Device Evaluation (ODE)

Evision Sign-Off)

Division of Conomic Restorative

and Neurological Devices

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